

# Remote Access Agreement

Submission Deadline: August 15, 2014

**Please Print Clearly**

**Fax or Email Completed Form to Kristine Gaffaney**  
**Fax: (907)465-2989 - Email:kristine.gaffaney@alaska.gov**

Company or Organization: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Purpose of Access: Use of Migrant Education Program Student Database

Duration of Agreement: July 1, 2014 – June 30, 2015

(Not to exceed 365 days)

Please indicate your status:

Federal Programs Director: ☐ Employee ☐ Contractor ☐ Other: \_\_\_\_\_  
*Please Explain*

Records Manager: ☐ Employee ☐ Contractor ☐ Other: \_\_\_\_\_  
*Please Explain*

By signing on the line below, you are agreeing:

- To safeguard the security of any password provided to you by system administrators
- Not to share the system access you have been given
- That you will not perform actions on Alaska Department of Education and Early Development Information Technology resources which are inconsistent with the spirit of this agreement, violate any State or Federal law or result in system instability.
- That any computer you will use to access the Migrant Education Program Student Database is protected by Anti-Virus with current updates and is free of any malicious code or applications (E.G., virus, Trojans, worms, key loggers, back doors, etc.)

**District Federal Programs Director**

**Migrant Education Records Manager**

\_\_\_\_\_  
*Printed Name*

\_\_\_\_\_  
*Printed Name*

\_\_\_\_\_  
*Signature of Person Above*

\_\_\_\_\_  
*Signature of Person Above*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Date*

**The State of Alaska reserves the right to rescind this agreement at any time without prior notification.**